117000010559

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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COVER LETTER

TO:	Registration Sec Division of Corp			
cup ic	NUTE, LLC			
SUBJE	CI:	Name of Lim	ited Liability Company	
The enc	losed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspor	ndence concerning this matter	to the following:	
		Santiago Lukauskis		
			Name of Person	
		Nute, LLC		
			Firm/Company	
		915 Fairway Drive		
			Address	
		Miami Beach, Florida 331	41	
			City/State and Zip Code	
		slukauskis90@gmail.com		
		·	to be used for future annual report notific	cation)
For furt	her information co	ncerning this matter, please co	all:	
Manuel	L. Crespo, Esq.		305 789-2770 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	e following amount:		
□ \$25	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION' OF

NUTE, LLC	led Clabilles Compo	nu es il new concert	on our records V	
(take of the Mail	(A Florida Cimited	iny as it now songers (Liability Company)	on day territory	
The Articles of Organization for this Limited L	lability Company	were filed on 01-1	7-2017	_ and assigned
Florida document number L17000010559	25 V 1854	2 37.,		
This amendment is submitted to amend the following	owine:			
The second secon	, -,	medicina solo com	* .	
A. If amending name, enter the new name of	i the fillited had	anta combana bet	;	
The new same must be distinguishable and contain the	vords "Limited Liebi	lity Company," the des	gnation "LLC" or the abbr	eviation "LLLC."
Enter new principal offices address, if applicable:		915 Fairway Driv	<u> </u>	···
Principal office address MUST BE A STRE		Miami Beach, Florida 33141		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				1
		1		The same of the sa
		A	gartagar gara	. 9
B. If amending the registered agent and	or registered o	ffice address on (our records, enter th	te name of the
egistered agent and/or the new registered o	ilice address ner	<u>'e</u> :		. •
Name of New Registered Agent:	Santiago Luka	uskis	a Addin was desired	
	915 Fairway D	rivë.		
New Registered Office Address:			a street address	
	Miami Beach	<u> </u>	Florida 3314	
		City	, , , , , , , , , , , , , , , , , , , ,	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or if this document is being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address .	Type of Action
MGR	Yanina Lukauskis	1390 Brickell Avenue	□ ∧dd
		Suite 200	■ Remove
		Miami, Florida 33131	Change
MGR	Santiago Lukuaskis	915 Fairview Drive	⊒ Add
		Miami Beach, Florida 33141	Remove
			Change
		**************************************	Remove
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ffective date, if other an effective date is listed, (ote: If the date inserte ocument's effective dat	the date must he specific d in this block does no	and cannot be prior ot meet the applic	to date of filing or m able statutory filin	(option ore than 90 days after g requirements, this	filing.) Pursuant to 605.03	207 . as
e record specifies a The 90th day afte			t an effective t	ime, at 12:01 a	.m. on the earlier	of
		2017	·			
ated April 17		\mathcal{N}	orized representative			

Page 3 of 3

Filing Fee: \$25.00